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CONFIRMATION NO. 5595

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|---|---|-----------------------------------|---|--|------------------------------------|
| SERIAL NUMBER 10/668,673 | FILING OR 371(c) DATE 09/23/2003 RULE | CLASS 604 | GROUP ART UNIT 3767 | ATTORNEY DOCKET NO. CT/00-001.CIP.D2 | |
| APPLICANTS Mark W. Hitchins, Sewickley, PA; Kevin P. Cowan, Allison Park, PA; Francis J. Sciulli, Crafton, PA; Robert D. Parks, Pittsburgh, PA; | | | | | |
| ** CONTINUING DATA ***** This application is a DIV of 09/777,020 02/05/2001 PAT 6,652,489 which is a CIP of 09/718,230 11/21/2000 ABN and claims benefit of 60/180,647 02/07/2000 and claims benefit of 60/229,550 09/05/2000 | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/15/2003 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u> </u> Examiner's Signature Initials | | STATE OR COUNTRY PA | SHEETS DRAWING 137 | TOTAL CLAIMS 17 | INDEPENDENT CLAIMS 2 |
| ADDRESS 21140 | | | | | |
| TITLE FRONT-LOADING MEDICAL INJECTOR ADAPTED TO RELEASABLY ENGAGE A SYRINGE REGARDLESS OF THE ORIENTATION OF THE SYRINGE WITH RESPECT TO THE INJECTOR | | | | | |
| FILING FEE RECEIVED 1850 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |